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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identity Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your ting with the trustee.	Nikki First name Lynn Middle name Papenburg Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years de your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-4102	

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Case number (if known)

Debtor 1 Nikki Lynn Papenburg

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 906 Painter Street Streator, IL 61364 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code La Salle County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

D

ebtor 1	Nikki Lynn Papenl	burg Case number (if known)
art 2:	Tell the Court About	our Bankruptcy Case
Ban	chapter of the nkruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.
cno	choosing to file under	■ Chapter 7
		☐ Chapter 11
		☐ Chapter 12
		☐ Chapter 13
Hov	w you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with

	11 ,	ize and you are unable to pay the fee in inst to the Chapter 7 Filing Fee Waived (Official F	allments). If you choose this option, you must fill orm 103B) and file it with your petition.	ut
Have you filed for bankruptcy within the	■ No.			
last 8 years?	☐ Yes.			
	District	When	Case number	
	District	When	Case number	

When

10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate?

The Filing Fee in Installments (Official Form 103A).

Debtor		Relationship to you
District	When	Case number, if known
Debtor		Relationship to you
District	When	Case number, if known

Case number

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may,

but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that

11. Do you rent your residence?

Go to line 12. No.

a pre-printed address.

District

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes.

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Deb	otor 1 Nikki Lynn Papen	burg		Document Page 4 of 54 Case number (if known)
Par	t 3: Report About Any Bu	usinesses	You Own	as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.
		☐ Yes.	Name	and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code
	it to this petition.		Check	k the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate dicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1)(B).
	For a definition of small	■ No.	I am r	ot filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	r Have Any	/ Hazardo	ous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to public health or safety?	L 103.	What is	the hazard?
	Or do you own any property that needs If immediate attention is needed, why is it needed?			

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Nikki Lynn Papenburg

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Nikki Lynn Papen	burg		Case nur	mber (if known)	
Par	t 6: Answer These Quest	ions for Rep	oorting Purposes			
16.	What kind of debts do you have?			onsumer debts? Consumer debts are conal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an	
		I	☐ No. Go to line 16b.			
		I	Yes. Go to line 17.			
				usiness debts? Business debts are de estment or through the operation of the		
		I	☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you o	owe that are not consumer debts or busi	iness debts	
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter	7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any exempt prailable to distribute to unsecured credit	property is excluded and administrative expenses ors?	
	administrative expenses	ı	No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	1 -49		☐ 1,000-5,000	□ 25,001-50,000	
	you estimate that you owe?	☐ 50-99		5 001-10,000	5 0,001-100,000	
		☐ 100-199 ☐ 200-999		☐ 10,001-25,000	☐ More than100,000	
19.	How much do you	□ \$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?		- \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
	50 1101		01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
		— \$500,00)ı - ֆi million			
20.	How much do you	□ \$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?	\$50,001 - \$100,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10.000.000.001 - \$50 billion	
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion	
		_ φοσο,στ	T TIME			
Par	t 7: Sign Below					
For	you	I have exa	mined this petition, and I dec	clare under penalty of perjury that the in	formation provided is true and correct.	
				7, I am aware that I may proceed, if eligi relief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.	
				not pay or agree to pay someone who is se notice required by 11 U.S.C. § 342(b)		
		I request re	elief in accordance with the	chapter of title 11, United States Code,	specified in this petition.	
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
			Lynn Papenburg nn Papenburg	Signature of De	ebtor 2	
		Signature		-		
		Executed of	on October 28, 2016	Executed on		
			MM / DD / YYYY		MM / DD / YYYY	

Debtor 1 Nikki Lynn Papenburg Page 7 of 54 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christina Banyon	Date	October 28, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Christina Banyon		
Printed name		
Banyon & Scheinbaum, LLC		
3077 West Jefferson Street		
Suite 107		
Joliet, IL 60435		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	cbanyon.law@gmail.com
6283282		
Bar number & State		

eck if this is an ended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	80,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	34,117.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	114,117.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	81,161.31
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	13,171.12
	Your total liabilities	\$	94,332.43
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,867.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,506.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 9 of 54 Case number (if known) Debtor 1 Nikki Lynn Papenburg

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

1,580.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	C	Case 16-34431	Doc 1		10/28/16 ument	Entered 10/28/1 Page 10 of 54	6 11:22:46	6 Des	c Main	
Fill	in this infe	ormation to identify y	our case and t			1 (1)(1) (1) (1) (1)				
Deb	otor 1	Nikki Lynn Pa	penburg							
Dah	otor O	First Name	Midd	lle Name		Last Name				
	otor 2 use, if filing)	First Name	Midd	lle Name		Last Name				
Unit	ted States	Bankruptcy Court for th	ne: NORTHEI	RN DISTI	RICT OF ILLIN	IOIS				
Cas	se number					-		I	☐ Check if the contract of th	
SC n ea hink	chedu ch category c it fits best.	Be as complete and ac	cribe items. List	ole. If two	married people	n asset fits in more than one are filing together, both are	equally respons	ible for sup	he category who	-
nsv	ver every qu		·			e top of any additional pages	, write your nam	e and case	number (if knov	vn).
		<u> </u>								
	o you own o	or nave any legal or equi	table interest in	any reside	ence, building,	land, or similar property?				
	No. Go to F	Part 2.								
	Yes. When	e is the property?								
1.1				What	is the property	? Check all that apply				
	906 Pair	nter Street			Single-family h		Do not deduct s	secured clai	ms or exemption	s. Put
	Street addre	ss, if available, or other descri	ption		Duplex or mult Condominium	i-unit building	the amount of a	any secured	claims on Sched s Secured by Pro	dule D:
	Streato	· IL	61364-0000		Manufactured Land	or mobile home	Current value entire property	y ?	Current value of portion you ov	vn?
	City	State	ZIP Code		Investment pro Timeshare Other	pperty	Describe the n		\$80, ur ownership in ncy by the entir	
				Who I		in the property? Check one	a life estate), i		ncy by the entir	eties, oi
	La Salle				Debtor 2 only					
	County				Debtor 1 and D	Debtor 2 only the debtors and another	Check if t		nunity property	
				Other		ou wish to add about this iter	•	110/13/		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$80,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt	or 1	Case 16-3443		Filed 10/28/16 Document	Entered 10/28 Page 11 of 54	/16 11:22:46	Desc Main
		Nikki Lynn Paper				se number (# known)	
3. Ca	rs, van	s, trucks, tractors, s	sport utility ven	licies, motorcycles			
	No						
	Yes						
3.1	Make:	Mazda		Who has an interest in the	e property? Check one		ured claims or exemptions. Put secured claims on <i>Schedule D:</i>
	Model			Debtor 1 only		Creditors Who Have	ve Claims Secured by Property.
	Year:	2006	400.000	Debtor 2 only		Current value of t	
		ximate mileage:information:	180,000	Debtor 1 and Debtor 2 o	•	entire property?	portion you own?
		age NADA Value :	- ¢2275	At least one of the debto	ors and another		
	Avei	age NADA Value =	= ΨΖΖΙΊ	Check if this is common (see instructions)	unity property	\$2,275	\$2,275.00
5 A (n for all of your entries fr hat number here			\$2,275.00
Part 3	: Des	cribe Your Personal an	d Household Ite	ms			
Do y	ou owr	n or have any legal c	or equitable into	erest in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	kample: No	Id goods and furnisl s: Major appliances, fo Describe		china, kitchenware			
		Mis	c. Household	I Goods and Furniture	e of Debtor		\$950.0
E:	No	s: Televisions and rac		o, stereo, and digital equip edia players, games	oment; computers, printer	rs, scanners; music co	ollections; electronic devices
		Cel	I Phone, Com	puter, Tv			\$300.0
E:	kample: No	les of value s: Antiques and figuring other collections, make the collections of the collection			oks, pictures, or other art	objects; stamp, coin,	or baseball card collections;
9. Eq	uipme kample:	nt for sports and ho	ic, exercise, and	d other hobby equipment;	bicycles, pool tables, golf	f clubs, skis; canoes a	and kayaks; carpentry tools;
E	irearm: Exampl∈ No		guns, ammuniti	on, and related equipment	t		

	Case 10-344		Decriment		.8/10 11.22.40	Desc Main
Debtor 1	Nikki Lynn Paper	nburg	Document	Page 12 of 54	Case number (if known)	
☐ Yes.	Describe					
□ No	s bles: Everyday clothes, Describe	furs, leather coats, de	signer wear, shoes,	accessories		
	Per	sonal Used Clothin	ng of Debtor			\$400.00
■ No □ Yes. 13. Non-fa Examp ■ No □ Yes. 14. Any ot		horses Isehold items you dic			welry, watches, gems, g	old, silver
15. Add t	the dollar value of all art 3. Write that numb	of your entries from ler here			you have attached	\$1,650.00
	vn or have any legal c		n any of the followi	ng?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ples: Money you have i			sit box, and on hand w	when you file your petitic	on
		s, or other financial acc have multiple account			edit unions, brokerage h	ouses, and other similar
Yes			Institution na	ame:		
	17	.1.	Bakelight	Credit Union Che	cking	\$172.00
	17	2.	Bakelight	Credit Union Savi	ngs	\$20.00
Examp ■ No	, mutual funds, or pul oles: Bond funds, inves			ey market accounts		
joint v ■ No	renture			rporated businesses	s, including an interes	t in an LLC, partnership, and
⊔ Yes.	Give specific informat	ion about them Name of entity:			% of ownership:	

Official Form 106A/B Schedule A/B: Property page 3

	0 10 011	04 D 4	Eil- 4 40/00/40	Francial 40/00/40 44 00 40	Dana Mair
	Case 16-344	ST DOC 1	Document	Entered 10/28/16 11:22:46 Page 13 of 54	Desc Main
Debtor 1	Nikki Lynn Paper	nburg	Bocament	Case number (if known)	
Nego Non-r ■ No	tiable instruments included the segotiable instruments and Give specific informati	de personal check are those you canr		egotiable instruments missory notes, and money orders. by signing or delivering them.	
	ment or pension acco		I(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing	blans
■ No					
☐ Yes.	List each account sepa Ty	arately. pe of account:	Institution r	name:	
Your : Exam	ity deposits and prepa share of all unused dep ples: Agreements with	osits you have ma	ide so that you may con rent, public utilities (elec	tinue service or use from a company ctric, gas, water), telecommunications compan	ies, or others
■ No □ Yes.			Institution r	name or individual:	
23. Annui	ties (A contract for a pe	eriodic payment of	money to you, either for	r life or for a number of years)	
■ No					
☐ Yes.	lssuer r	name and descript	ion.		
26 U.S	ets in an education IRA .C. §§ 530(b)(1), 529A(n a qualified ABLE pro	ogram, or under a qualified state tuition pro	gram.
■ No □ Yes.	Institution	on name and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
	s, equitable or future i	nterests in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
■ No □ Yes.	Give specific informat	ion about them			
26. Paten	ts, copyrights, tradem	arks, trade secre	ts, and other intellectu	ual property	
Exam ■ No	ples: Internet domain n	ames, websites, p	roceeds from royalties a	and licensing agreements	
	Give specific informat	ion about them			
Exam ■ No		exclusive licenses		n holdings, liquor licenses, professional license	es
☐ Yes.	Give specific informat	ion about them			
Money or	property owed to you	1?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re ■ No	funds owed to you				

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. **Family support** *Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ Yes. Give specific information.....

Past Due Child Support

\$30,000.00

D	obtor 1	Case 16-34431		Filed 10/28/16 Document	Page 14 of 54	Desc Main	
De	ebtor 1	Nikki Lynn Papenbur	g		Case number (if known)		
30.		amounts someone owes y ples: Unpaid wages, disabili benefits; unpaid loans	ty insurance p		efits, sick pay, vacation pay, workers' comper	nsation, Social Security	
	☐ Yes.	Give specific information					
	Exam _l ■ No	sts in insurance policies ples: Health, disability, or life	·	,	HSA); credit, homeowner's, or renter's insurar	nce	
			pany name:	•	Beneficiary:	Surrender or refund	
	If you somed	terest in property that is deare the beneficiary of a living one has died. Give specific information			ed surance policy, or are currently entitled to rece	value: eive property because	
33.	33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim						
34.	Other	contingent and unliquidat	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims	
	■ No	, , , , , , , , , , , , , , , , , , ,			3		
	☐ Yes.	Describe each claim					
	■ No	nancial assets you did not Give specific information	already list				
36					ny entries for pages you have attached	\$30,192.00	
Pa	rt 5: De	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.		
_		own or have any legal or equi	itable interest i	n any business-related p	roperty?		
		o to Part 6.					
ı	→ Yes. (Go to line 38.					
Pa		escribe Any Farm- and Commo			n or Have an Interest In.		
46.	Do you	u own or have any legal or	equitable in	terest in any farm- or o	commercial fishing-related property?		
	■ No.	Go to Part 7.		-			
	☐ Yes	s. Go to line 47.					
Pa	rt 7:	Describe All Property You	Own or Have a	n Interest in That You Did	Not List Above		
53.		u have other property of an oldes: Season tickets, country					

 $\hfill \square$ Yes. Give specific information.......

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Case number (if known) Document Debtor 1 Nikki Lynn Papenburg

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$80,000.00
56.	Part 2: Total vehicles, line 5	\$2,275.00		
57.	Part 3: Total personal and household items, line 15	\$1,650.00		
58.	Part 4: Total financial assets, line 36	\$30,192.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$34,117.00	Copy personal property total	\$34,117.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$114,117.00

Official Form 106A/B Schedule A/B: Property page 6

			111 1 11111 11 11 11	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nikki Lynn Paper	burg		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	--------

1.	Which set of exemp	ptions are vo	ou claiming?	Check one only	. even if	vour spouse is	filing with	vou.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	906 Painter Street Streator, IL 61364 La Salle County	\$80,000.00		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1	•			100% of fair market value, up to any applicable statutory limit	
2006 Mazda 3 180,000 miles Average NADA Value = \$2275		\$2,275.00		\$2,400.00	735 ILCS 5/12-1001(c)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Misc. Household Goods and Furniture of Debtor	\$950.00		\$950.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Cell Phone, Computer, Tv	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line from Scriedule A/B. 1.1				100% of fair market value, up to any applicable statutory limit	
	Personal Used Clothing of Debtor Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
	Line from Scredule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-34431 Doc 1 Filed 10/28/16 Entered 10/28/16 11:22:46 Desc Main Document Page 17 of 54 Nikki Lynn Papenburg Case number (if known) Brief description of the property and line on *Schedule A/B* that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Bakelight Credit Union Checking** 735 ILCS 5/12-1001(b) \$172.00 \$172.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Bakelight Credit Union Savings** 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Past Due Child Support** 735 ILCS 5/12-1001(g)(4) \$30,000.00 \$30,000.00 Line from Schedule A/B: 29.1 100% of fair market value, up to

		any applicable statutory limit
3.	•	claiming a homestead exemption of more than \$160,375? to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.
	Yes	Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Case	16-34431	Doc 1 Filed 10/28/16 Document F	Entered	d 10/28/16 11:2	22:46 Desc M	lain
Fill in this informatio	n to identify you		auc. 10	01.54		
Debtor 1 N	ikki Lynn Pape	enbura				
	rst Name		ast Name			
Debtor 2 (Spouse if, filing) Fire	rst Name	Middle Name L	_ast Name			
United States Bankrup	otcy Court for the:	NORTHERN DISTRICT OF ILLIN	OIS			
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Forms 40	OCD.					
Official Form 10						
Schedule D:	Creditors	Who Have Claims Se	ecured	l by Property	y	12/15
		If two married people are filing together, out, number the entries, and attach it to t				
1. Do any creditors have	claims secured by	y your property?				
☐ No. Check this	box and submit th	his form to the court with your other so	hedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in all o				· ·	•	
		bolow.				
	cured Claims			Column A	Column B	Column C
for each claim. If more th	an one creditor has	more than one secured claim, list the credito a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 First State Ba	nk	Describe the property that secures the	claim:	\$81,161.31	\$80,000.00	\$1,161.31
Creditor's Name		906 Painter Street Streator, IL La Salle County	61364			
PO Box 380		As of the date you file, the claim is: Che	eck all that			
Mendota, IL 6	1342	apply. Contingent				
Number, Street, City, S		☐ Unliquidated				
,,		☐ Disputed				
Who owes the debt?	Who owes the debt? Check one. Nature of lien. Check all that apply.					
Debtor 1 only	■ Debtor 1 only □ An agreement you made (such as mortgage or secured					
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the del		☐ Judgment lien from a lawsuit				
☐ Check if this claim re community debt	elates to a	Other (including a right to offset)				
Data daht was insurred		Last 4 digits of account number	7200			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$81,161.31

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$81,161.31

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

· ·	743C 10 0++01 L	Document	Page 1	9 of 54	2.40	oo waa
Fill in this info	ormation to identify your					
Debtor 1	Nikki Lynn Papen	hura				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
(Spouse II, IIIIIIg)	Filst Name					
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF I	ILLINOIS			
Case number						
(if known)						check if this is an
					a	mended filing
Official Fo	rm 106F/F					
		ho Have Unsecure	d Claims			12/15
		e Part 1 for creditors with PRIOR		Part 2 for creditors with NO	ONPRIORITY clai	
Schedule D: Cred left. Attach the C name and case n	ditors Who Have Claims Secontinuation Page to this pagoumber (if known).	ired Leases (Official Form 106G) ured by Property. If more space i e. If you have no information to i	is needed, copy	the Part you need, fill it ou	it, number the en	tries in the boxes on the
	All of Your PRIORITY Un					
_ `	litors have priority unsecure	a ciaims against you?				
No. Go to	Part 2.					
Yes.	All of Vour MONDDIODIT	V Unacquired Claims				
	All of Your NONPRIORIT					
	litors have nonpriority unsec					
□ No. You I	have nothing to report in this p	art. Submit this form to the court wi	th your other sch	edules.		
Yes.						
unsecured cl	laim, list the creditor separately	aims in the alphabetical order of / for each claim. For each claim list st the other creditors in Part 3.lf yo	ted, identify what	type of claim it is. Do not list	claims already inc	cluded in Part 1. If more
						Total claim
4.1 Advar	nced Medical Transpo	rt Last 4 digits of a	ccount number	7664		\$190.00
•	rity Creditor's Name	When was the de	ht incurred?			
	Solution Center go, IL 60677	when was the de	bt incurred?			-
	Street City State Zlp Code	As of the date yo	u file, the claim	is: Check all that apply		
Who in	curred the debt? Check one.					
Deb	tor 1 only	☐ Contingent				
☐ Debi	tor 2 only	☐ Unliquidated				
☐ Debt	tor 1 and Debtor 2 only	☐ Disputed				
☐ At le	ast one of the debtors and and	_	ORITY unsecure	d claim:		
	ck if this claim is for a comr	_				
debt Is the c	laim subject to offset?	☐ Obligations ari		aration agreement or divorce	that you did not	
■ No				ng plans, and other similar de	ebts	
☐ Yes		Other. Specify				
		Caren Opcony				

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Case number (if know)

Debtor	1 Nikki Lynn Papenburg	Case number (if know)	
4.2	Americollect	Last 4 digits of account number 623A	\$24.00
	Nonpriority Creditor's Name	 	•
	1851 S. Alverno Road	When was the debt incurred?	
	Manitowoc, WI 54220 Number Street City State Zlp Code	As of the data you file the plains in Ol. 1. It is	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for Infinity Meds	
4.3	Blitt & Gaines	Last 4 digits of account number C968	\$1,113.16
	Nonpriority Creditor's Name		
	661 Glenn Avenue	When was the debt incurred?	
	Wheeling, IL 60090 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date you me, the stand is. Officer all that apply	
	■ Debtor 1 only	Пол	
	_	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for Portfolio Recovery	
4.4	Calvary Portfolio	Last 4 digits of account number 4060	\$467.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	500 Summit Lake Drive Valhalla, NY 10595	when was the dept incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		·	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		☐ Debts to pension or profit-sharing plans, and other similar debts	
	No		
	☐ Yes	■ Other. Specify Collection	

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Case number (if know)

Central Illinois Radiological Ass.	Last 4 digits of account number 1101	\$18.00
Nonpriority Creditor's Name 5200 Reliable Parkway Chicago, IL 60686	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Consumer Collection	Last 4 digits of account number	\$61.00
Nonpriority Creditor's Name	Last 4 digits of account fidiliber	φ01.00
PO Box 1839	When was the debt incurred?	
Maryland Heights, MO 63043 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection	
Convergent Healthcare Recoveries	Last 4 digits of account number 4400	\$47.00
Nonpriority Creditor's Name	When was the debt insurred?	
PO Box 6209 Dept 0102	When was the debt incurred?	
Champaign, IL 61826		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection	

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Case number (if know)

4.8	Creditors Collection Bureau	Last 4 digits of account number 9205	\$135.00
	Nonpriority Creditor's Name 755 Almar Pkwy Bourbonnais, IL 60914	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
4.9	Creditors Discount & Audit	Last 4 digits of account number	\$241.00
	Nonpriority Creditor's Name 415 East Main Street PO Box 213	When was the debt incurred?	
	Streator, IL 61364	As All a later of Clark and the later of the	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collecton	
4.1 0	Illinois Valley Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number 5392	\$1,288.00
	925 West Street	When was the debt incurred?	
	Peru, IL 61354	As All a later of Clark and the later to Oliver to Hilliam and	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only		☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical Debt	

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Nikki Lynn Papenburg	Case number (if know)				
IVCH Collection Department	Last 4 digits of account number 0001	\$1,287.96			
Nonpriority Creditor's Name 925 West Street	When was the debt incurred?				
Peru, IL 61354 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	The state of the s				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	□ Unliquidated				
☐ Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	Other. Specify Medical Debt				
LaSalle County Housing Authority	Last 4 digits of account number	\$600.00			
Nonpriority Creditor's Name		4000.00			
526 E Norris Dr	When was the debt incurred?				
Ottawa, IL 61350 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify				
Macys	Last 4 digits of account number	\$304.00			
Nonpriority Creditor's Name		<u> </u>			
PO Box 78008	When was the debt incurred?				
Phoenix, AZ 85062 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	Should be seen the state of the state o				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
□ No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Credit card purchases				

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Case number (if know)

Debto	Nikki Lynn Papenburg	Case number (if know)				
4.1	Midle of Fourtiers	2700	\$700.00			
4	Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number 2780	\$763.00			
	8875 Aero Drive	When was the debt incurred?				
	Suite 200					
	San Diego, CA 92123					
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	\square Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Collection				
4.1	North Control DUC	Last 4 digits of account number 7952	\$ CO.00			
5	North Central BHS Nonpriority Creditor's Name	Last 4 digits of account number	\$69.00			
	PO Box 1488	When was the debt incurred?				
	La Salle, IL 61301					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical				
4.1	Northland Crays	2600	¢204.00			
6	Northland Group Nonpriority Creditor's Name	Last 4 digits of account number 3600	\$304.00			
	PO Box 390846 Minneapolis, MN 55439	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	□ ves	Other Court. Collection - Macvs				

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Debto	Nikki Lynn Papenburg	Case number (if know)		
4.1	Old Navy	Last 4 digits of account number	\$466.00	
	Nonpriority Creditor's Name PO Box 965003 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit card purchases		
4.1	One Advantage	Last 4 digits of account number	\$105.00	
	Nonpriority Creditor's Name 7650 Magna Druve	When was the debt incurred?		
	Belleville, IL 62223 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Collection St. Marys		
4.1	OSF Healthcare	Last 4 digits of account number 7209	\$201.00	
9	Nonpriority Creditor's Name 7978 Solution Center	When was the debt incurred?		
	Chicago, IL 60677			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other Specify Medical Debt		

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Case number (if know)

Debto	^{r 1} Nikki Lynn Papenburg	Case number (if know)				
4.2	OSF Healthcare	Last 4 digits of account number 6749	\$111.00			
0	Nonpriority Creditor's Name 7978 Solution Center	When was the debt incurred?	********			
	Chicago, IL 60677 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Debt				
4.2 1	OSF Healthcare	Last 4 digits of account number 0176	\$412.00			
	Nonpriority Creditor's Name 7978 Solution Center Chicago, IL 60677	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical Debt				
4.2	OSF Medical Group	Last 4 digits of account number 9478	\$256.00			
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ_00.00			
	PO Box 91011	When was the debt incurred?				
	Chicago, IL 60680 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	ne of the date year me, the damner. Oncok an that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical Debt				

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Case number (if know)

Debtor	Nikki Lynn Papenburg	Case number (if know)	
4.2	Portfolio Recovery	Last 4 digits of account number	\$1,062.00
	Nonpriority Creditor's Name 120 Corporate Blvd Suite 1	When was the debt incurred?	
Norfolk, VA 23502 Number Street City State Zlp Code Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection	
4.2	State Collection Service Nonpriority Creditor's Name	Last 4 digits of account number	\$204.00
-	2509 S. Stoughton Road Madison, WI 53716 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Collection	
4.2	Walmart / SYNCB Nonpriority Creditor's Name	Last 4 digits of account number	\$1,062.00
-	PO Box 965024 Orlando, FL 32896 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
	■ No	Debts to pension or profit-snaring plans, and other similar debts Other Careful Caref	

Document Page 28 of 54 Case number (if know) Debtor 1 Nikki Lynn Papenburg 4.2 \$2,380.00 World Finance Corp. Last 4 digits of account number 6 Nonpriority Creditor's Name When was the debt incurred? PO Box 6249 Greenville, SC 29606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Personal Loan** ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? **Infinity Meds** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Box 078180 Part 2: Creditors with Nonpriority Unsecured Claims Milwaukee, WI 53278 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Macvs Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 8218 Part 2: Creditors with Nonpriority Unsecured Claims Monroe, OH 45050 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Portfolio Recovery Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 120 Corporate Blvd Part 2: Creditors with Nonpriority Unsecured Claims Suite 1 Norfolk, VA 23502 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a 6a 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. Other. Add all other priority unsecured claims. Write that amount here. 0.00 Total Priority. Add lines 6a through 6d. 6e 0.00 Total Claim Student loans 6f. 0.00 Total claims

from Part 2

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

6q.

6h.

6i.

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

you did not report as priority claims

here

6q.

6h.

0.00

0.00

13,171.12

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Debtor 1 Nikki Lynn Papenburg

Total Nonpriority. Add lines 6f through 6i.

6j. 13,171.12

			1 H H H H H H H H H H H H H H H H H H H			
Fill in this infor	Fill in this information to identify your case:					
Debtor 1	Nikki Lynn Paper	nburg				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

		Docume	nt Page 31 o	of 54
Fill in this	information to identify you	r case:		
Debtor 1	Nikki Lynn Pape	nhura		
200101	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, fili	ng) First Name	Middle Name	Last Name	
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
0	h			
Case num (if known)	Der			☐ Check if this is an
,				amended filing
	l Form 106H			
Sched	lule H: Your Cod	debtors		12/15
	and case number (if knowr			e as a codebtor.
■ No □ Yes	S			
	hin the last 8 years, have yo na, California, Idaho, Louisiana			ry? (Community property states and territories include ington, and Wisconsin.)
	Go to line 3. s. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?	
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			<u> </u>
	City	State	ZIP Code	

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Sill	in this information to identify you	r 0000:				1			
		n Papenburg							
	btor 2 puse, if filing)								
Uni	ited States Bankruptcy Court for	he: NORTHERN DISTRI	CT OF ILLINOIS						
l	se number nown)		-				nded filing ement showi	ng postpetition	
<u>O</u>	fficial Form 106l					MM / DI)/ YYYY		
S	chedule I: Your In	come							12/15
spo atta	plying correct information. If youse. If you are separated and youch a separate sheet to this formation. The separate sheet to this formation. If your are separated and your employment.	our spouse is not filing w n. On the top of any additi	ith you, do not incluional pages, write yo	ıde infor	mati	on about your I case number	spouse. If m (if known). <i>i</i>	ore space is Answer every	needed,
	information.		Debtor 1				□ Employed □ Not employed		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ■ Not employed						
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include stude or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About M	Ionthly Income							
spo	imate monthly income as of the use unless you are separated. bu or your non-filing spouse have		-						
mor	e space, attach a separate sheet	to this form.	ombine the informatic	ni ioi ali v	smpi	For Debtor 1	For De	ebtor 2 or ling spouse	you need
2.	List monthly gross wages, sa deductions). If not paid month			2.	\$	0.0	_	N/A	
3.	Estimate and list monthly ov	ertime pay.		3.	+\$	0.0	<u> </u>	N/A	
4.	Calculate gross Income. Add	l line 2 + line 3.		4.	\$	0.00	\$	N/A	

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Deb	or 1	Nikki Lynn Papenburg		Ca	ise number (i	f known)				
				F	For Debtor	1		or Debtor on-filing s		
	Cop	by line 4 here	4.	\$	S	0.00	\$_		N/A	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	3	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	. \$	3	0.00	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	. \$	3	0.00	\$		N/A	-
	5d.	Required repayments of retirement fund loans	5d.			0.00			N/A	
	5e.	Insurance	5e.			0.00			N/A	-
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	. 9		0.00			N/A N/A	
	5g. 5h.	Other deductions. Specify:	5g. 5h.			0.00			N/A N/A	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	·	0.00			N/A	-
			7.	φ						-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	Ф		0.00	- Φ_		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	. \$	3	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. \$	3	0.00	\$		N/A	<u>.</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.	. \$	2	87.00	\$		N/A	
	8d.	Unemployment compensation	8d.	. \$	3	0.00	\$		N/A	-
	8e.	Social Security	8e.	. \$	S	0.00	_ \$_		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.								
		Specify: Social Security Disability	_ 8f.			80.00			N/A	
	8g.	Pension or retirement income	8g.			0.00			N/A	-
	8h.	Other monthly income. Specify:	_ 8h.	.+ \$		0.00	_ + \$ _		N/A	<u>. </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,8	67.00	\$_		N/A	X .
10	Cal	culate monthly income. Add line 7 + line 9.	10.		1,867.0	0 + \$		N/A	= \$	1,867.00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	.0.	Ψ	1,007.0	-				1,007.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe				•	Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies							\$	1,867.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combin monthly	ned y income
	=	No.								

Official Form 106I Schedule I: Your Income page 2

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						•			
Fill in th	nis information to	identify yo	our case:						
Debtor 1	Nikl	ki Lynn P	apenbur	g		_	neck if this is:		
Debtor 2	2							filing It showing postpetition chap	oter
(Spouse	e, if filing)					"		as of the following date:	
United S	States Bankruptcy (Court for the	: NORTH	HERN DISTRICT OF ILLIN	NOIS		MM / DD / Y	YYY	
Case nu									
(If know	n)								
Offic	cial Form	106.J							
	edule J:		Exper	ises					12/1
Be as of information in the info	complete and a ation. If more sp er (if known). An	ccurate as pace is ne swer ever	possible eded, atta y questio	. If two married people a ich another sheet to this				ible for supplying correct vrite your name and case	
Part 1: 1. Is	Describe Ye this a joint case		hold						
	No. Go to line 2			ate household?					
	i Yes. Does Deb □ No	tor 2 live i	n a separ	ate nousenoid?					
	_	btor 2 mus	st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.		
2. D o	o you have depe	endents?	□ No						
Do	o not list Debtor ebtor 2.		Yes.	Fill out this information for each dependent	Dependent's related Debtor 1 or Debtor		Depender age	Does dependent live with you?	
Do	o not state the							□ No	
de	ependents names	3.			Daughter		17	■ Yes	
								□ No	
								□ Yes □ No	
								□ No □ Yes	
								□ Yes	
								□ Yes	
	o your expense			No					
	penses of peop purself and you			Yes					
expens	te your expens	es as of yo	our bankr					a Chapter 13 case to repo top of the form and fill in	
				government assistance					
	ue of such assi al Form 106l.)	stance an	a nave ind	cluded it on Schedule I:	Your Income		You	ir expenses	
	ne rental or hom ayments and any			nses for your residence. or lot.	Include first mortgag	e 4.	\$	788.00	
If	not included in	line 4:							
4a	a. Real estate	taxes				4a.	\$	0.00	
4b				's insurance		4b.		0.00	
40				upkeep expenses		4c.	·	0.00	
4c				dominium dues our residence , such as he	ome equity loans	4d. 5	\$	0.00	

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Debtor 1 Nikki Ly	nn Papenburg	Case num	ber (if known)	
6. Utilities:				
	v, heat, natural gas	6a.	\$	500.00
•	ewer, garbage collection	6b.	\$	150.00
	e, cell phone, Internet, satellite, and cable services	6c.	·	160.00
6d. Other. Sp		6d.	·	0.00
	•		·	
	sekeeping supplies	7.	·	400.00
	children's education costs	8.	\$	0.00
-	dry, and dry cleaning	9.	\$	50.00
	products and services	10.	\$	50.00
. Medical and de	•	11.	\$	50.00
 Transportation Do not include of 	Include gas, maintenance, bus or train fare. Par payments	12.	\$	200.00
	, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	tributions and religious donations	14.	·	0.00
5. Insurance.	it ibutions and religious donations	14.	Ψ	0.00
	nsurance deducted from your pay or included in lines 4 or 20.			
15a. Life insur		15a.	\$	0.00
15b. Health in		15b.	·	0.00
15c. Vehicle in		15c.	· ———	158.00
		15d.	·	
15d. Other ins	nclude taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
Specify:		16.	\$	0.00
7. Installment or		17a.	c	0.00
	nents for Vehicle 1		·	0.00
	nents for Vehicle 2	17b.	·	0.00
17c. Other. Sp		17c.		0.00
17d. Other. Sp	•	17d.	\$	0.00
	s of alimony, maintenance, and support that you did not report a your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	is you make to support others who do not live with you.	•	\$	0.00
Specify:		19.	•	0.00
	perty expenses not included in lines 4 or 5 of this form or on Sch		our Income.	
	es on other property	20a.		0.00
20b. Real esta	• • •	20b.		0.00
	homeowner's, or renter's insurance	20c.	·	0.00
	nce, repair, and upkeep expenses	20d.	·	0.00
	ner's association or condominium dues	20d. 20e.	· ·	
			·	0.00
I. Other: Specify:		21.	+\$	0.00
2. Calculate your	monthly expenses			
22a. Add lines 4	4 through 21.		\$	2,506.00
22b. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	· · · · · · · · · · · · · · · · · · ·
	2a and 22b. The result is your monthly expenses.		\$	2,506.00
ZZO. AUU III IE ZZ	La ana 225. The result is your monthly expenses.			2,300.00
	monthly net income.			
23a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	1,867.00
23b. Copy you	r monthly expenses from line 22c above.	23b.	-\$	2,506.00
	your monthly expenses from your monthly income. It is your <i>monthly net income</i> .	23c.	\$	-639.00
	•		form?	
For example, do y	an increase or decrease in your expenses within the year after you expect to make paying for your car loan within the year or do you expect you			e or decrease because o
	e terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Fill in this infer								
	rmation to identify your							
Debtor 1	Nikki Lynn Papen	Middle Name	Las	t Name				
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Las	t Name				
United States B	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINO	IS				
Case number								
(if known)						☐ Check if this is an amended filing		
If two married p You must file th		r, both are equally resp le bankruptcy schedule n connection with a bar	onsible for s	upplying correct	t information. aking a false state	ement, concealing property, or 00, or imprisonment for up to 20		
Sig	gn Below							
Did you pa	ay or agree to pay some	one who is NOT an atto	orney to help	you fill out bank	kruptcy forms?			
■ No								
☐ Yes.	Name of person					kruptcy Petition Preparer's Notice, ,, and Signature (Official Form 119)		
	alty of perjury, I declare re true and correct.	that I have read the sur	nmary and s	chedules filed w	rith this declaration	on and		
X /s/ Nik	kki Lynn Papenburg		х					
Nikki	Lynn Papenburg ure of Debtor 1			Signature of Deb	btor 2			
Date	October 28, 2016			Date				

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	l in this inform	ation to identify you	r case:							
De	ebtor 1	Nikki Lynn Pape First Name	enburg Middle Name	Last Name						
	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name						
Ur	nited States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS						
Cs	ase number									
	(nown)					Check if this is an amended filing				
	fficial For									
St	atement	of Financial	Affairs for Indivi	duals Filing for E	Bankruptcy	4/10				
info	ormation. If mo		attach a separate sheet to		equally responsible for sup y additional pages, write yo					
	<u> </u>	,	arital Status and Where Yo	u Lived Before						
1.	What is your	current marital statu	us?							
	☐ Married■ Not marr	ried								
2.	During the la	st 3 vears, have you	lived anywhere other than	where vou live now?						
	_									
	■ No □ Yes. List	all of the places you	lived in the last 3 years. Do	not include where you live nov	v.					
	Debtor 1 Pri	or Address:	Dates Debtor 1	1 Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there				
3. sta					nity property state or territor lico, Texas, Washington and V					
	■ No									
		ke sure you fill out Sci	hedule H: Your Codebtors (0	Official Form 106H).						
Pa	rt 2 Explair	n the Sources of You	ır Income							
4.	Fill in the total	amount of income yo	ou received from all jobs and	ing a business during this y all businesses, including part ve together, list it only once u		ndar years?				
	□ No									
	_	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		year before that: cember 31, 2014)	■ Wages, commissions, bonuses, tips	\$4,495.00	☐ Wages, commissions, bonuses, tips	,				
			☐ Operating a business		☐ Operating a business					

Official Form 107

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5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, ur and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gamblin winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.												
	List e	ach s	ource and	the gross inco	me from ea	ach source sepa	arately. Do i	not include income	that you listed in lir	ne 4.		
	_	No Yes. I	-ill in the d	etails.								
					Debtor 1				Debtor 2			
						of income below.	each	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	;
				ent year until nkruptcy:	SSI Ben	efits		\$15,800.00)			
			dar year: December	31, 2015)	SSI Ben	efits		\$18,960.00)			
Pa	rt 3:	List	Certain Pa	avments You	Made Befo	ore You Filed fo	or Bankrup	ıtcv				
1 4	11 5.	List	Ocitaini	ayıncınıs rou	made Bere	ore rournear	or Barrara	itoy				—
ô.	_	i ther No.	Neither Dindividual During the No.	ebtor 1 nor D primarily for a	ebtor 2 ha personal, f	amily, or house	nsumer del hold purpos	ots. Consumer de se."	<i>bt</i> s are defined in 11		I(8) as "incurred by a	ın
			☐ Yes	paid that cre not include	editor. Do n payments t	ot include paymon of an attorney fo	nents for do or this bankr	mestic support ob uptcy case.	e in one or more pay ligations, such as ch on or after the date c	nild support ar	nd alimony. Also, do	
	•	Yes.				e primarily con for bankruptcy,			ital of \$600 or more?	?		
			■ No.	Go to line 7								
			□ Yes		ments for d	lomestic suppor			nd the total amount ipport and alimony.		creditor. Do not nclude payments to a	ın
	Cred	ditor's	s Name an	d Address		Dates of payı	ment	Total amount paid	Amount you still owe	Was this p	ayment for	
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corpo of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						ral partner; corporation agent, including one						
	_	No Voc. I	ict all nav	ments to an in	sidor							
			Name and		Sidel.	Dates of payı	ment	Total amount paid	Amount you still owe	Reason for	r this payment	
								paiu	Juli Owe			

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De	Nikki Lyiiii Papenburg			=1 (II KIIOWII)					
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cosing the cost of		ments or transfer any prop	perty on account of a de	bt that benefited an				
	■ No □ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment		unt you Reason for to	his payment tor's name				
Pai	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures							
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes.								
	□ No								
	Yes. Fill in the details. Case title	Nature of the case	Court or agency	Status of the	case				
	Case number			Otatus of the	Cusc				
	Portfolio Recovery v. Nikki Papenburg 16 SC 968	Collection	La Salle County	■ Pending □ On appea □ Conclude					
10.	Within 1 year before you filed for bankruptc		erty repossessed, foreclos	ed, garnished, attached	, seized, or levied?				
	Check all that apply and fill in the details below	<i>i</i> .			•				
	No. Go to line 11.								
	Yes. Fill in the information below.	Describe the Branarty		Data	Value of the				
	Creditor Name and Address	Describe the Property		Date	Value of the property				
		Explain what happened							
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?								
	■ No □ Yes. Fill in the details.								
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or ar		erty in the possession of a	n assignee for the benef	fit of creditors, a				
	No								
	☐ Yes								
Pa	rt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrupt No	cy, did you give any gift	s with a total value of more	than \$600 per person?					
	Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value				

Address:

Person to Whom You Gave the Gift and

Case 16-34431 Doc 1 Filed 10/28/16 Entered 10/28/16 11:22:46 Desc Main Document Page 40 of 54 Case number (if known) Debtor 1 Nikki Lynn Papenburg 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Banyon & Scheinbaum, LLC \$650 (Attorney Fee) + \$335 (Filing Fee) \$985.00 3077 West Jefferson Street = \$985 Suite 107 Joliet, IL 60435 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο п Yes. Fill in the details. **Person Who Was Paid** Amount of Description and value of any property Date payment Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

transferred in the ordinary course of your business or financial affairs?
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 Nikki Lynn Papenburg

19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p		ny property to a sel	f-settled trust or similar devic	e of which you are a
	☐ Yes. Fill in the details.				
	Name of trust	Description and v	value of the proper	ty transferred	Date Transfer was made
Pai	rt 8: List of Certain Financial Accounts, I	nstruments, Safe Deposi	t Boxes, and Stora	ge Units	
20.	sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass	or other financial accou	nts; certificates of	•	
	■ No				
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within a cash, or other valuables?	l year before you filed for	r bankruptcy, any s	safe deposit box or other depo	ository for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution	Who also had so	Who else had access to it? Describe the contents		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	t or place other than you	home within 1 yea	ar before you filed for bankrup	otcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Contro				
23.	Do you hold or control any property that s for someone.	omeone else owns? Incl	ude any property y	ou borrowed from, are storing	g for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value
Pai	rt 10: Give Details About Environmental In	formation			
For	the purpose of Part 10, the following defini	tions apply:			
	Environmental law means any federal, sta toxic substances, wastes, or material into regulations controlling the cleanup of the	the air, land, soil, surfac	e water, groundwa		
	Site means any location, facility, or proper to own, operate, or utilize it, including disp		environmental law,	, whether you now own, opera	ate, or utilize it or used

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Nikki Lynn Papenburg

24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admini	strative proceeding under any envir	onmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Con	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	/ business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to Part	12.						
	☐ Yes. Check all that apply above and fill in t	the details below for each business.						
		escribe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	ame of accountant or bookkeeper	Do not include Social Security Dates business existed	number or IIIN.				
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement to	o anyone about your business? Inclu	ude all financial				
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued						

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Debtor 1 Nikki Lynn Papenburg Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nikki Lynn Papenburg Nikki Lynn Papenburg Signature of Debtor 2 Signature of Debtor 1 Date October 28, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:				
Debtor 1	Nikki Lynn Paper	hura				
Debioi i	First Name	Middle Name		Last Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ra	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILL	INOIS		
Office Otates Ba	initiapitely doubt for the.	TOTAL DIO	THIOT OF ILL			
Case number						
(if known)						☐ Check if this is an
						amended filing
000 : 15	400					
Official Fo	rm 108					
Statemer	nt of Intentio	n for Indiv	viduals	Filing Under Chap	oter 7	12/15
						,.,
If you are an indi	vidual filing under cha	nter 7 vou must fil	l out this form	n if·		
	e claims secured by yo	. ,,	rout tino tori			
_			-4!!			
	ed personal property a			bankruptcy petition or by the dat	o cot for th	a masting of araditors
				use. You must also send copies to		
on the		io ocurr oxionac in	·	addi i da madi alda dana dapida k	J 1110 01 0411	oro una roccoro you not
	ople are filing togethe d date the form.	r in a joint case, bo	th are equall	y responsible for supplying corre	ct informat	ion. Both debtors must
Sigil ali	u date the form.					
			s needed, atta	ach a separate sheet to this form.	On the top	of any additional pages,
write yo	our name and case nu	mber (if known).				
Dort 4: Lint Va	Cuaditana Wha Hav	a Cassumad Claima				
Part 1: List Yo	our Creditors Who Hav	e Secured Claims				
1. For any credite	ors that you listed in P	art 1 of Schedule D	: Creditors W	ho Have Claims Secured by Prop	erty (Offici	al Form 106D), fill in the
information be						
Identify the cre	editor and the property t	hat is collateral	What do ye secures a	ou intend to do with the property		Did you claim the property as exempt on Schedule C?
			secures a	uest:	a	is exempt on ochequie o:
Creditor's F	irst State Bank		☐ Surrend	ler the property.		□No
name:				the property and redeem it.		
				he property and enter into a		Yes
Description of	906 Painter Street	,		mation Agreement.		
property	61364 La Salle Co	ounty	Retain t	he property and [explain]:		
securing debt:				lortgage Discharge Note		
	our Unexpired Persona					
For any unexpire	d personal property le	ase that you listed	in Schedule	G: Executory Contracts and Unex	pired Leas	es (Official Form 106G), fill
				es are leases that are still in effect oes not assume it. 11 U.S.C. § 365		period has not yet ended.
Tou may assume	an unexpired persona	al property lease in	ine irusiee u	bes not assume it. 11 0.3.6. § 303	(μ)(Ζ).	
Describe your u	nexpired personal pro	perty leases			Will th	ne lease be assumed?
•						
Lessor's name:					□ No)
Description of lea	ased					
Property:					☐ Ye	es
Lessor's name:)
Description of lea Property:	ased					
i Toperty.					□ Ye	es
Lessor's name:					□ No	
					L 13(j.

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debt	tor 1	Nikki Lynn Papenburg	Case number (if known)	
	criptior erty:	n of leased		☐ Yes
Less	sor's na			□ No
	criptior erty:	n of leased		☐ Yes
	sor's na	ame: n of leased		□ No
	erty:	Torreased		☐ Yes
	or's na			□ No
	erty:	n of leased		☐ Yes
	or's na			□ No
	criptior erty:	n of leased		☐ Yes
Part	3:	Sign Below		
		alty of perjury, I declare that I have in aat is subject to an unexpired lease.	ndicated my intention about any property of my estate that se	cures a debt and any personal
X		ikki Lynn Papenburg	x	
		i Lynn Papenburg ture of Debtor 1	Signature of Debtor 2	
	Date	October 28, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-34431 Doc 1 Filed 10/28/16 Entered 10/28/16 11:22:46 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Nikki Lynn Pa	penburg		Case No.		
			Debtor(s)	Chapter	7	
	DIS	CLOSURE OF CO	MPENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)	
C	compensation paid to	o me within one year before	P. 2016(b), I certify that I am the attorn the filing of the petition in bankruptcy, plation of or in connection with the ban	or agreed to be paid	to me, for services ren	dered or to
	For legal service	es, I have agreed to accept		\$	650.00	
	Prior to the filin	ig of this statement I have re	ceived	\$	650.00	
	Balance Due			\$	0.00	
2. 7	The source of the cor	mpensation paid to me was:				
	Debtor	☐ Other (specify):				
3.	The source of compe	ensation to be paid to me is:				
	■ Debtor	☐ Other (specify):				
4.	I have not agreed	d to share the above-disclose	ed compensation with any other person	unless they are mem	bers and associates of a	ny law firm.
			ompensation with a person or persons w the names of the people sharing in the			v firm. A
5.]	In return for the abo	ve-disclosed fee, I have agre	eed to render legal service for all aspect	s of the bankruptcy of	ase, including:	
t c	 Preparation and f Representation of [Other provisions Negotiatio reaffirmat 	filing of any petition, schedul f the debtor at the meeting of s as needed] ons with secured creditor	nd rendering advice to the debtor in detection detection, statement of affairs and plan which it creditors and confirmation hearing, are to reduce to market value; executions as needed; preparation on household goods.	may be required; and any adjourned hea	rings thereof; preparation and fil	ing of
6. I			osed fee does not include the following any adversary proceeding.	g service:		
			CERTIFICATION			
	certify that the fore ankruptcy proceeding		nt of any agreement or arrangement for	payment to me for r	epresentation of the del	otor(s) in
o	ctober 28, 2016		/s/ Christina Bany	von		
	ate		Christina Banyon Signature of Attorne Banyon & Schein 3077 West Jeffers Suite 107	y Bbaum, LLC		_

Joliet, IL 60435

Name of law firm

cbanyon.law@gmail.com

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United States Bankruptcy Court Northern District of Illinois

In re	Nikki Lynn Papenburg	Debtor(s) Case No. Chapter 7	
	VE	RIFICATION OF CREDITOR MATRIX	
		Number of Creditors:	27
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors is true and cor	rrect to the best of my
Date:	October 28, 2016	/s/ Nikki Lynn Papenburg Nikki Lynn Papenburg Signature of Debtor	

Advanced Medical Transport 7504 Solution Center Chicago, IL 60677

Americollect 1851 S. Alverno Road Manitowoc, WI 54220

Blitt & Gaines 661 Glenn Avenue Wheeling, IL 60090

Calvary Portfolio 500 Summit Lake Drive Valhalla, NY 10595

Central Illinois Radiological Ass. 5200 Reliable Parkway Chicago, IL 60686

Consumer Collection PO Box 1839 Maryland Heights, MO 63043

Convergent Healthcare Recoveries PO Box 6209 Dept 0102 Champaign, IL 61826

Creditors Collection Bureau 755 Almar Pkwy Bourbonnais, IL 60914

Creditors Discount & Audit 415 East Main Street PO Box 213 Streator, IL 61364

First State Bank PO Box 380 Mendota, IL 61342

Illinois Valley Community Hospital 925 West Street Peru, IL 61354

Infinity Meds
Box 078180
Milwaukee, WI 53278

IVCH Collection Department 925 West Street Peru, IL 61354

LaSalle County Housing Authority 526 E Norris Dr Ottawa, IL 61350

Macys PO Box 78008 Phoenix, AZ 85062

Macys PO Box 8218 Monroe, OH 45050

Midland Funding 8875 Aero Drive Suite 200 San Diego, CA 92123

North Central BHS PO Box 1488 La Salle, IL 61301

Northland Group PO Box 390846 Minneapolis, MN 55439

Old Navy PO Box 965003 Orlando, FL 32896

One Advantage 7650 Magna Druve Belleville, IL 62223

OSF Healthcare 7978 Solution Center Chicago, IL 60677 OSF Medical Group PO Box 91011 Chicago, IL 60680

Portfolio Recovery 120 Corporate Blvd Suite 1 Norfolk, VA 23502

State Collection Service 2509 S. Stoughton Road Madison, WI 53716

Walmart / SYNCB PO Box 965024 Orlando, FL 32896

World Finance Corp. PO Box 6249 Greenville, SC 29606